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ABSTRACT

This document provides 2001-02 year service plan guidelines for fulfilling the requirements of the Student Health Partnership, a joint endeavor of the provincial government partners of Alberta Learning, Health and Wellness, Children's Services, and the Alberta Mental Health Board, to enhance the provision of a range of integrated health and related support services for identified children with special health needs registered in school programs and to improve access to these services. It begins by explaining the goals of the Student Health Initiative, student eligibility, and services that are provided. Service plan guidelines are then described and include: (1) a statement of accountability; (2) a Student Health Partnership profile; (3) a description of student health needs and service priorities; (4) an explanation of the goals of the program; (5) performance measures, targets, and strategies that will be used to ensure effectiveness; (6) a human resource plan; and (7) a financial plan. Appendices include a list of Student Health Initiative principles, an explanation of student health funding, a checklist of the seven required components of the service plan, a classroom teacher survey about student health services, and related forms. A list of operating educational programs is also provided. (CR)

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Student Health Partnership

Service Plan
Guidelines for 2001/2002
Student Health Initiative

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Student Health Initiative (SHI)

The Student Health Initiative is a joint endeavour of the provincial government partners of Alberta Learning, Health and Wellness, Children's Services, and the Alberta Mental Health Board.

The Student Health Initiative's annual service delivery budget is allocated to Student Health Partnerships to enhance the provision of a range of integrated health and related support services for identified children with special health needs registered in school programs and improve access to these services. The Student Health Partnerships adhere to the Student Health Initiative principles (see Appendix A, page 19) to help these children participate fully in education programs to attain their potential and be successful at learning.

In the Student Health Initiative, children with special health needs are those children who:

- have physical disabilities, developmental disabilities, neurological disorders, sensory impairments, medical conditions, emotional/behavioural disabilities
  and
- are registered in school programs funded by Alberta Learning from Early Childhood Services (ECS) to Grade 12.

Students and children eligible to receive student health services are those who are registered with Alberta Learning in any of the following:

- public school programs (provided by public or separate school jurisdictions, or charter schools)
- private school programs
- private ECS operator programs
- institutional education programs
- homebound programs and home schooling programs
- alternative programs, such as virtual, blended, and outreach.

Student health services include:

- rehabilitation (speech-language therapy, physical therapy, occupational therapy, audiology and respiratory therapy)
- clinical nursing
- emotional/behavioural supports; e.g., mental health, psychology, social work, family/school liaison and behavioural intervention.

Student Health Services and Costs

The following chart will help Student Health Partnerships determine what services are eligible for SHI funding. Follow the decision path (1–6) to ensure the Partnership's planned services meet the criteria.

	Decision Path	Criteria
1 ⇓	**Is the child eligible to receive a student health service?**	Children with special health needs are those children who: • have physical disabilities, developmental disabilities, neurological disorders, sensory impairments, medical conditions, emotional/behavioural disabilities and • are registered in school programs funded by Alberta Learning from Early Childhood Services (ECS) to Grade 12.
2 ⇓	**What is the child's special health need?**	The student requires health and related support services to participate fully in his or her education program to attain his or her potential and be successful at learning, as identified in the student's service plan or Individualized Program Plan (IPP).
3 ⇓	**Which eligible student health service(s) meets the identified need?**	Eligible Student Health services, which recognize cultural diversity and are provided in a culturally appropriate manner, include: • speech-language therapy • physical therapy • occupational therapy • audiology • respiratory therapy • clinical nursing • emotional/behavioural supports; e.g., mental health, psychology, social work, family/school liaison, behavioural intervention.
4 ⇓	**Who is the service provider appropriate to meet the need?**	Professionals and/or paraprofessionals are eligible service providers. – Teachers are not eligible service providers when working in an instructional role — see Q&A, page 3. – Teacher assistants are eligible service providers for only that portion of time spent providing student health services — see Q&A, page 3.
5 ⇓	**Which service provider activity is appropriate?**	• The following direct service activities provided to an identified student are appropriate: – assessment – consultation – program development – direct therapy – counselling for emotional/ behavioural issues – program implementation – services provided in the summer, where identified as necessary in the student's documented service plan or IPP. • The following indirect service activities are appropriate **only** when provided by an eligible service provider (who already is providing a direct service): – case conferencing – service coordination – referral and follow-up – monitoring and evaluation – family/school liaison.
6	**What are the eligible costs to provide the service?**	Eligible costs (see page 5) are those human resource costs directly related to program delivery of student health services, such as: • salary/contract • employee benefits • administrative support personnel • travel • training • clinical supervision • client-centered evaluation processes.

Eligible Student Health Service Providers

An eligible service provider, from an eligible service category, provides one or more types of service for an identified student with a special health need. Together, these constitute an eligible student health service when they are delivered to assist the student to be successful at learning.

- For example, a speech-language pathologist may provide assessment, consultation, program development, inservicing, supervision, monitoring, evaluation, service coordination and case-conferencing as elements of intervention with an identified student with a special health need to enable the student to be successful at learning.

Are teacher assistants eligible student health service providers under the SHI?

Yes, teacher assistants working under the direction of professional staff with students with special health needs and implementing program plans developed by professional staff are eligible service providers.

- Since teacher assistants may spend only a portion of their time providing student health services, school authorities may wish to estimate their costs by using a percentage. The suggested guide is that 25% of a teacher assistant's time is spent providing health and related support services to students with special health needs in the classroom.

Are teachers eligible student health service providers under the SHI?

When a person who is qualified and/or certified as a teacher is working in the role/capacity of a teacher, that is to provide instruction to students, that person is **not** an eligible service provider. If a person with the same qualifications and/or certification is working in a non-instructional role, that person could be considered an eligible service provider in an eligible service category providing an eligible service.

- For example, a teacher who has appropriate professional qualifications and who works part-time in an instructional role and part-time in a school counsellor role could be an eligible service provider in the role as a counsellor. Counselling is an eligible service in the category of emotional/behavioural supports. In this situation, the counsellor could be a service provider under the SHI to deliver emotional/behavioural supports as specified on the student service plans or Individualized Program Plans of identified students with special health needs.

The importance of including classroom teachers in case conferences is recognized. As a result of better coordination and integration of student health services through the Student Health Initiative, there may be an increase in the demand for classroom teachers to attend case conferences to ensure that these services will support students' abilities to participate fully and be successful at learning. For that reason, a Special Eligible Cost can support this activity (see Eligible Student Health Costs, page 5).

Eligible Student Health Service Delivery Activities

When is inservicing and/or supervision an eligible student health service activity?

In order to be an eligible student health service, inservicing and/or supervision must be provided to an eligible service provider who is working directly with identified students with special health needs. For example:

- inservicing teachers about asthma, where there are identified students in their classrooms with these conditions, is an eligible student health service
- inservicing the classroom team on behaviour management, when that team works directly with identified students with behavioural issues, is an eligible student health service
- providing information sessions to parents of children identified with special health needs, when it is intended to help their children be successful at learning, is an eligible health service
- a school-wide inservicing on language development is **not** an eligible student health service activity.

What are some examples of ineligible student health service activities?

The following are ineligible student heath service activities:

- population or public health services intended to benefit all students, not just those with identified special health needs; e.g., immunization, dental health, reproductive health
- broad-based prevention programs not directed to identified students with special health needs; e.g., school-wide bully proofing program or classroom-wide language development program
- services for which being successful at learning is not the primary goal.

Eligible Student Health Costs

Eligible Human Resource Costs Relating to Student Health Program Delivery	Eligible Costs Relating to the Student Health Partnership Administration	Special Eligible Cost	Ineligible Costs
Human resource costs directly related to the program delivery of student health services, such as: • salary/contract • employee benefits • administrative support personnel • travel • training • clinical supervision • client-centered evaluation processes.	Costs associated with Partnership administration, such as • administrative support personnel • accounting and reporting • travel costs for Partnership meetings • Partnership management • brochures. Partnership administration funding is a shared resource among all partners in the Student Health Partnership. The funding for the Student Health Initiative includes a component for Student Health Partnership administration costs equivalent to 4.5% of the total funding allocation. Partnership administration costs exceeding the 4.5% allocation must be borne by the Partnership.	A special eligible cost is allowed *only* for replacement of the classroom teacher to participate in case conferences related to *only* those individual students with identified student health needs to a maximum of 1.5% of the Student Health Partnership's total service delivery funding allocation.	Ineligible costs include: • construction/purchase of land or buildings • rental/lease of space* • office furnishings/ equipment for staff* • technical aids, adaptive equipment/devices for students • school food programs • child care costs • transportation costs for students. * Contact Alberta Infrastructure for support relating to these.

Can children/students be taken to the service rather than bringing the service to them? If so, can transportation costs be covered by the SHI?

- Children/students can be transported to the service if it is not possible to bring the service to them, but costs to transport these students are not eligible under the Student Health Initiative.
- Student Health Partnerships are encouraged to plan student health services in ways that meet needs in the school or local community.

Student Health Partnership

Each Student Health Partnership **must** include the following:

- public school jurisdiction
- regional health authority
- regional office of the Alberta Mental Health Board
- child and family services authority **and**
- other school authorities (such as charter schools, private schools and private ECS operators) within the geographic area of the Partnership.

Joint Management
Shared responsibility for Partnership decisions and actions (with no single partner taking a dominant role).

Student Health Partnerships incorporate the following:

- shared vision
- open and clear communication
- joint management
- equal accountability and risk sharing
- continuous improvement.

Joint service planning and annual reporting occur as a continuous improvement cycle, in which the ability of the Student Health Partnership to meet the special health needs of identified children is enhanced through monitoring and evaluation.

Pooled/shared Resources
Pooled/shared resources are allocated to and used by the Partnership as a whole. As resources for a common purpose, they do not belong to any one partner

- All partners in the Partnership must be involved in the planning process and deciding how to spend the pooled SHI funding (see Appendix B, page 21).
- The Partnership is expected to facilitate involvement of parents and other stakeholders in the planning process and development of the Student Health Partnership Service Plan.
- Partnerships must address the needs of identified students with special health needs registered in school programs funded by Alberta Learning.
- Families and relevant stakeholders must have the opportunity for input in the planning process.

Service Plan Guidelines

The Student Health Partnership Service Plan identifies local priorities and describes how the Partnership plans to:

- improve access to and the provision of integrated health and related support services for children with special health needs registered in school programs
- help ensure that children with special health needs are able to participate fully in education programs to attain their potential and be successful at learning.

Seven Required Components of the Service Plan

The Student Health Partnership Service Plan is a public document. The Plan must be a concise document of about 10 pages that is prepared collaboratively by the partners in the Student Health Partnership and describes the way student health services will be delivered to the students with special health needs.

Approval of the Service Plan will be based on evidence of the Student Health Partnership's commitment to the student health principles (see Appendix A, page 19) and the following seven required components:

1. Statement of Accountability
2. Student Health Partnership Profile
3. Student Health Needs and Service Priorities
4. Goals
5. Performance Measures, Targets and Strategies
6. Human Resource Plan
7. Financial Plan.

See Appendix C, page 24 for a checklist of the seven required components.

1. Statement of Accountability

The statement of accountability:

1.1 is signed by the CEO or equivalent of each of the partners in the Student Health Partnership (school jurisdiction, regional health authority, regional office of the Alberta Mental Health Board, child and family services authority, and other school authorities, such as charter schools, private schools and private ECS operators) — the name and title of the person signing must be under each signature

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1.2 confirms the accuracy and is in agreement with the information contained in the plan

1.3 confirms the Student Health Partnership's commitment to carry out the terms and conditions of the Service Plan to the best of the Partnership's ability

1.4 confirms that all partners in the Partnership are maintaining their 1998/1999 levels of expenditure (baseline) on student health services.

What signatures are required on the Student Health Partnership Service Plan submitted by a local Student Health Partnership?

- Each partner in the Partnership is required to sign the Statement of Accountability.
- The signature indicates to government that the partner wishes to have the student health funding allocation directed to the Partnership that it is choosing to join.
- Original signatures on one master copy of the Student Health Partnership Service Plan are **not** required.
  - A Statement of Accountability signature page can be prepared and faxed to each partner. One or more signatures can be on a page and multiple pages are acceptable as long as a signature from each partner is present.
  - Multiple signature pages should have the name of the Partnership and the year of Service Plan included in the header on each page.
- If arrangements are made at the local Partnership level to have one partner sign on behalf of other partners; e.g., one private ECS program signing for five other private ECS programs, there must be a letter from each jurisdiction/authority that indicates authorization of that named partner to sign on their behalf.

2. Student Health Partnership Profile

The profile must include the:

2.1 operating name and mailing address of the Student Health Partnership

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2.2 names of designated contact(s), to a maximum of four, for public and media inquiries, including address, phone number, fax and e-mail address

2.3 identification of each partner in the Partnership (public and separate school jurisdictions, other school authorities, regional health authorities, regional child and family services authorities, regional offices of the Alberta Mental Health Board, and other partnering organizations)

2.4 identification of relevant stakeholders in the Student Health Partnership

2.5 identification of the school jurisdiction which is designated as the recipient ("the banker") for the Partnership's funding allocation

2.6 vision and principles guiding the Student Health Partnership.

Who are partners?
Partners are those organizations within the Student Health Partnership that have signed the Statement of Accountability and completed Form 1, if applicable (see page 16 for further information).

3. Student Health Needs and Service Priorities

3.1 The Student Health Partnership must ensure that parents and relevant stakeholders have opportunities for input in identifying student needs.

3.2 The Student Health Partnership must determine student health needs by identifying the:
- needs, issues and critical risks
- service gaps
- 1998/1999 levels of expenditure (baseline) on student health services by each of the partners
- health and related support service needs which are not adequately being met.

3.3 The service priorities, based on an assessment of student health needs and service gaps, must identify:
- which needs, within the range of student health services, will be addressed in the Student Health Partnership Service Plan
- reasons students with special health needs may be unable to access services; e.g., grade level, duration of need for service, level of severity of disability, etc.

4. Goals

A goal is a broad, issue-oriented statement that reflects what the Student Health Partnership wants to achieve. There are two goals for the Student Health Initiative.

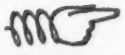
4.1 The required short-term (process) goal is:

- school-aged children with special health needs have **access** to a **range** of **coordinated** health and related support services to meet their needs.

Performance measures and targets related to the required short-term goal are listed in 5.1 (see below).

4.2 The long-term (outcome) goal is:

- school-aged children with special health needs are able to participate fully in their education programs to attain their potential and be successful at learning.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The long-term goal is a desired outcome for the Student Health Initiative and will be achieved, at least in part, through the performance measures and strategies related to the short-term goal. While the long-term goal is attainable over time, it *will not* have required performance measures at this time.

4.3 Student Health Partnerships are encouraged to identify additional goals to address outcomes such as:

- continuous quality improvement
- student, parent and other stakeholder satisfaction.

5. Performance Measures, Targets and Strategies

5.1 Performance Measures and Targets

A *performance measure* is a quantified means of tracking a process or result.

A *target* is a description of the desired level of performance for a program, typically involving some increment of improvement over the current state.

The required performance measures and targets relate to the required short-term goal and include:

- the number of students to be served
- range of services
- access to coordinated/integrated services to improve student learning.

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5.1.1 Number of students to be served

Identify the target numbers of students with special health needs the Partnership plans to serve in each eligible student health service category (see the following example).

Service Need	Number of Students with Special Health Needs Partnership Plans to Serve
Speech-language Therapy	60
Physical Therapy Etc....	20

5.1.2 Range of services

Identify student health services that the partners in your Partnership provided in 1998/1999 in comparison to the student health services that your Partnership is providing this school year, with a target increase in the available range of services.

In a chart, describe the types of baseline (1998/1999) services, planned enhancements to baseline services and planned new services (see the following example).

Types of Baseline (1998/1999) Services	Planned Enhancements to Baseline Services	Planned New Services
Speech-language services provided to students with special health needs in K–3	Increased number of hours of speech-language services per student with special health needs in K–3	Speech-language services to be provided to students with special health needs in Grades 4–6
Physical therapy Etc.		

5.1.3 Access to coordinated/integrated services to improve student learning

Identify how classroom teachers within the Partnership report on the effects of the SHI, with a target for improvement. The annual reporting guide requires that teachers' responses are collected relating to the following statements.

i. For each student with a special health need, an adequate plan is in place to provide student health services.

ii. It is easy to refer students for student health services.
iii. Student health services are provided within a reasonable time after a referral.
iv. The student health services that students need are available.
v. The student health services have improved students' abilities to be successful at learning.
vi. For students who need more than one student health service, the various services are well coordinated.

NOTE: A questionnaire that your Partnership may choose to use with classroom teachers is included in Appendix D, page 25.

5.1.4 Performance measures and targets also need to be identified for additional goals identified by your Partnership.

5.2 Strategies

A strategy is a key action to be taken to achieve the Student Health Partnership's goals.

- Strategies should be developed to accomplish the short-term (one to three years) goals of the Student Health Partnership.
- Strategies should be achievable within available resources, including human resources, and address identified needs, issues and areas for improvement.
- Strategies should be developed in collaboration with all stakeholders and describe how the Partnership will result in:
  - improved access to a range of coordinated and culturally appropriate student health services
  - better coordination of student health services for identified children with special health needs who are registered in school programs funded by Alberta Learning from Early Childhood Services (ECS) to Grade 12.

To successfully manage student health planning and service delivery, strategies must address:

5.2.1 the ongoing development of the Partnership, including decision-making and accountability processes

5.2.2 an ongoing process for the assessment of student health needs and available resources

5.2.3 processes to involve communities, parents/families and other stakeholders in planning for student health services

5.2.4 a system for collecting and managing information

5.2.5 processes for monitoring and evaluation

5.2.6 an accessible dispute resolution process

5.2.7 the operationalization of the service delivery model including:

- how the model and referral process works (once a student is identified as having a special health need, illustrate in a flow chart or narrative the steps from the referral process through to service delivery; indicate any differences if a student is registered in any one of the following programs — public school, private school, private ECS operator, alternative)
- how services are coordinated across partners
- how various service providers participate in the development, monitoring and evaluation of a student's service plan or Individualized Program Plan (IPP).

6. Human Resource Plan

6.1 Identify the necessary human resources required to implement the Student Health Partnership Service Plan.

- This section must be congruent with Form 2, which identifies eligible service categories, and expenditures on salaries and benefits and other service delivery costs.
- There is no need to duplicate the information provided in Form 2 (see Appendix F, pages 27–28).

6.1.1 In a chart, provide information to supplement Form 2, describing the position titles of the personnel hired to provide each eligible service under the professional and paraprofessional designations (see example of chart on next page).

6.1.2 In a chart, identify which partner is employing/ contracting which personnel (see example of chart on next page).

6.1.3 Describe briefly how the human resource plan will result in a service delivery model that leads to better coordinated and integrated student health services across the Student Health Partnership.

Example of Human Resource Plan

Service Need	Position Title for Each Professional (must be congruent with the projected numbers identified on page 2 of Form Two, see page 28)	Position Title for Each Paraprofessional (must be congruent with the projected numbers identified on page 2 of Form Two, see page 28)	Indicate Which Partner is Employing/Contracting Each Professional/Paraprofessional
Speech-language Therapy	5 speech-language pathologists	18 speech-language assistants	5 speech-language pathologists employed by XYZ Regional Health Authority 10 speech-language assistants employed by PPQ School Jurisdiction 6 speech-language assistants employed by FGH School Jurisdiction 1 speech-language assistant employed by ABC ECS operator 1 speech-language assistant employed by LMN private school
Physical Therapy			
Occupational Therapy			
Audiology			
Respiratory Therapy			
Clinical Nursing			
Emotional/ Behavioural Supports	1 Mental Health Therapist 2 Counsellors		1 Mental Health Therapist employed by the Alberta Mental Health Board 2 Counsellors employed by the PDQ School Jurisdiction
Teacher Assistants		17 Teacher Assistants	13 Teacher Assistants employed by FGH School Jurisdiction 3 Teacher Assistants employed by PDQ School Jurisdiction 1 Teacher Assistant employed by LMN Private School
Other		3 Family/School Liaison Workers	2 Family/School Liaison Workers employed by ABC Child and Family Services Authority 1 Family/School Liaison Worker on contract with PDQ School Jurisdiction

What are some good risk management practices for partners to incorporate?

Student Health Partnerships share decision making over the use of pooled resources. However, individual partners implement the decisions by employing or contracting with eligible service providers. While Partnerships are not legal entities themselves, they can take measures to assist partners in employing good risk management practices. Partners should consider the following.

- Partners who are recipients of SHI funds and employ staff to deliver student health services are responsible for those staff, as is the case with any of their employees.
- Employers of SHI funded staff need to ensure appropriate supervision of staff working in the school setting. Clinical and administrative supervision are important components of supervision. Appropriate qualifications to supervise the clinical component of practice are important to reduce risk related to staff performance.
- Performance appraisals can be a shared responsibility between the employer and designated personnel from the school setting, in order to facilitate both clinical and administrative supervision. These arrangements are best articulated in writing to ensure effective and safe practice within the school setting.
- Written guidelines for a communication process among all parties also is a critical factor in good risk management practice.

7. Financial Plan

Alberta Learning, on behalf of the provincial government partners, allocates the Student Health Initiative funding through school authorities to Partnerships according to school authority enrolments, on a school-year basis. The funding allocation is only accessed when partners join together in a Student Health Partnership.

The student health funding must be pooled and used as a shared resource by the Partnership to address priority student health needs, as identified in the Student Health Partnership Service Plan. Pooled/shared resources are allocated to and used by the Partnership as a whole. As resources for a common purpose, they do not belong to any one partner (see Appendix B, pages 20–23 for more information).

The financial plan must be submitted as part of the Student Health Partnership Service Plan and demonstrates accountability by projecting a budget (revenues and expenses) for student health service delivery.

The financial plan must include the following information.

7.1 Form 1 — Student Health Services Baseline Commitment (see Appendix E, page 26).

- Each partner is required to maintain its baseline (1998/1999) level of expenditure on student health services.
- However, the types and levels of services and supports offered by a partner may change as a result of the Student Health Partnership Service Plan.
- The Partnership discusses different ways of addressing student health needs with their baseline resources.

7.1.1 All Form 1s submitted in 2000/2001 are on file with the Provincial Student Health Coordinator.

7.1.2 A partner that is maintaining the same level of commitment to its current Partnership does not resubmit a Form 1.

7.1.3 A partner that was in operation in 1998/1999 but has never joined a Partnership must submit a Form 1.

7.1.4 A partner that is shifting some or all of its baseline commitment from one Partnership to another must submit a new Form 1.

7.1.5 The Partnership needs to ensure that the Form 1s on the provincial record correspond to the Partnership's record, so that the total baseline commitment for the Partnership set out on the Form 2 reconciles to satisfy financial requirements.

7.2 Form 2 — Student Health Partnership Projected Budget (see Appendix F, pages 27–28).

- The Student Health Partnership must complete and submit this form (pages one and two) as part of the Student Health Partnership Service Plan.
- Form 2 also identifies the Partnership's total baseline commitment
- Form 2 (page one) identifies the Partnership's projected revenues and expenses.
- Form 2 (page two) includes a human resource plan and projected expenses.
- **Surpluses can be carried forward to the next Service Plan year, but deficits are not permitted.**
  - Surplus funds should be carried forward on each budget line and only spent for that purpose. For example, unused funds in the one-time, start-up costs can be used for this purpose in subsequent years.
  - The Partnerships may reallocate administrative and start-up cost surplus to service delivery but service delivery surplus can not be assigned to administrative or start-up costs.

7.3 Provide any additional information that strengthens the linkage between financial information and the Service Plan.

7.4 For a school authority that is a partner in more than one Student Health Partnership, the same funding allocation model that was used for the Student Health Initiative should be applied to determine how the allocation should be proportioned among the Partnerships. An example is found in Appendix B, page 23.

The Partnership identifies in the Service Plan the proportioned amount of student health funding allocation each school jurisdiction and other school authority within the Partnership is contributing to this Partnership.

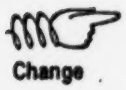
Submission and Approval of Service Plan

The Student Health Partnership Service Plan is annually developed for September 1 to August 31 and should broadly reflect a three-year planning cycle.

- As the Service Plan is developed for each new Service Plan year, progress relating to actions will be monitored, results will be evaluated and reported, and areas for continuous improvement will be identified by the Student Health Partnership.

Change

- The Service Plan must be submitted to the Provincial Student Health Coordinator (c/o Alberta Learning, 11160 Jasper Avenue, Edmonton, Alberta, T5K 0L2) by **May 15.**
- The review and approval of the Student Health Partnership Service Plan will be conducted by the provincial government partners — Alberta Learning, Health and Wellness, Children's Services and the Alberta Mental Health Board.


Change

- The Service Plan will be reviewed and approved on the basis of the **seven** required components. Omission of any of these components may result in a delay in the approval process.
- Approval of the Service Plan will be communicated in writing to the Student Health Partnership.
- Upon government approval of the Service Plan, the funding allocation will be released to the Partnership's banker.

Who can provide assistance to the Partnerships?
The Provincial Student Health Coordinator is available to meet with Partnerships to provide information and ongoing implementation support.

Annual Report Guidelines for 2000/2001 and 2001/2002

Please refer to the companion document — *Student Health Partnership: Annual Report Guidelines for 2000/2001 and 2001/2002.*

Change

The 2000/2001 Annual Report is due **November 30, 2001.**

The 2001/2002 Annual Report is due **November 30, 2002.**

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Appendix A — Student Health Initiative Principles

Government endorses the following principles to guide the planning, delivery and funding of student health services.

- Children with special health needs receive the health and related support services they need to participate fully in education programs to attain their potential and be successful at learning.
- Children and families are involved in decisions regarding the provision of student health services.
- Student health services involve joint planning, collaboration and flexibility at all levels.
- Student health services are based on assessed needs and provided to achieve specific results.
- Alberta Learning, Health and Wellness, and Children's Services will ensure resources are available for student health services.
- Student Health Partnership Service Plans at the local level must commit to 1998/1999 levels of expenditures (baseline) for student health and show how student health and baseline funding are consolidated to provide student health services.
- Student health services are organized to make the most efficient and effective use of student health and baseline resources.
- School authorities, regional health authorities, regional offices of the Alberta Mental Health Board, and child and family services authorities share accountability for student health services.

Appendix B — Student Health Funding

The Student Health Initiative provides annual funding to enhance the provision of a range of integrated student health services so children with special health needs are better able to learn at school. The funding is separate from the education funding provided to school authorities for students with special needs, as described in Alberta Learning's *Funding Manual for School Authorities*.

Alberta Learning, on behalf of the provincial government partners, allocates the student health funding through school authorities to Partnerships, according to school authority enrolments, on a school-year basis. The funding allocation is accessed only when partners join together in a Student Health Partnership.

The student health funding must be pooled and used as a shared resource by the Partnership to address priority student health needs as identified in the Student Health Partnership Service Plan. Pooled/shared resources are allocated to and used by the Partnership as a whole. As resources for a common purpose, they do not belong to any one partner.

All partners are expected to be involved in decisions relating to the use of the pooled funding, based on the approved Student Health Partnership's Service Plan.

Maintaining 1998/1999 Levels of Expenditure (Baseline)

Each partner is required to maintain its 1998/1999 level of expenditure (baseline) on student health services. However, the types and levels of services and supports offered by a partner may change as a result of the Student Health Partnership Service Plan. The Partnership can discuss different ways of addressing student health needs with their baseline resources.

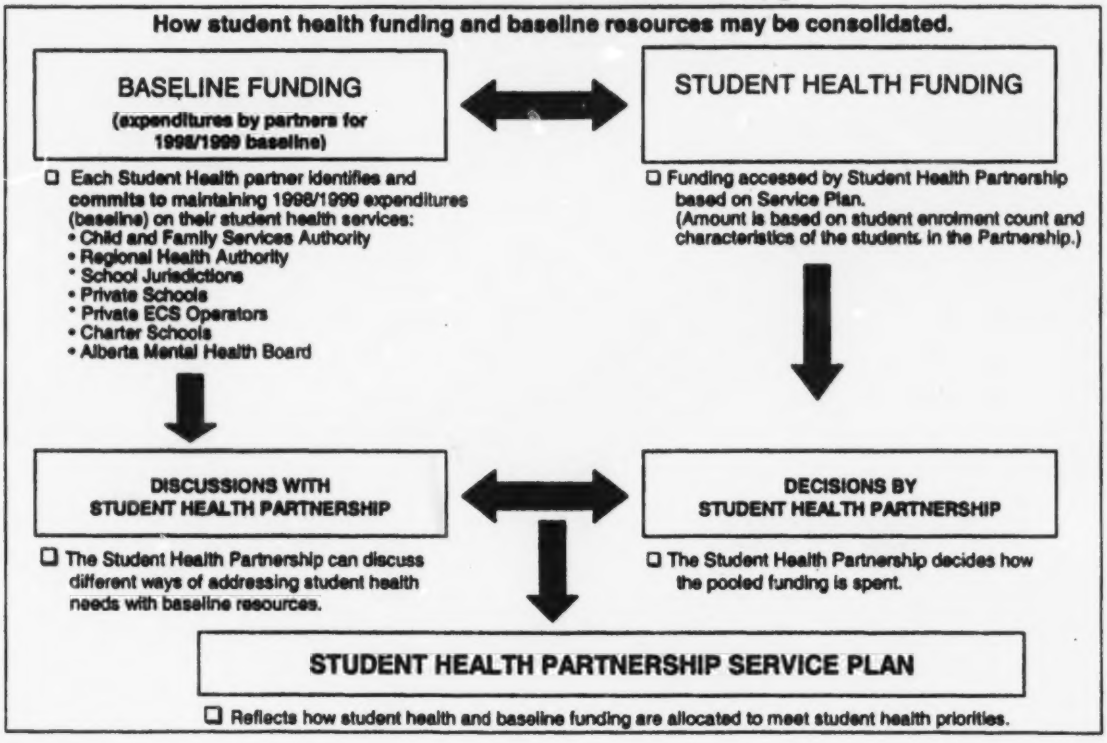
Release of Funds

Upon government's approval of the Student Health Partnership Service Plan, Alberta Learning releases the student health funding allocation to the school jurisdiction designated by the Partnership as the "banker" to receive and administer the funds allocated on behalf of the Partnership.

Government approval of release of the student health funding is contingent upon joint commitment of all partners in the Student Health Partnership to:

- use the funding for health and related support services for children with identified special health needs registered in school programs to be successful at learning
- maintain 1998/1999 levels of expenditure (baseline) on student health services, with the flexibility for partners to allocate other funds to support integrated student health services
- consolidate student health initiative resources to improve the provision of student health services
- report annually on achievement of results and the allocation of student health initiative funding
- use any student health initiative surplus funds for student health services only
- jointly manage student health services, at the local level, based on the approved Student Health Partnership Service Plan.

Pooled Student Health Funding


How student health funding and baseline resources may be consolidated.
BASELINE FUNDING
(expenditures by partners for 1998/1999 baseline)
STUDENT HEALTH FUNDING
Each Student Health partner identifies and commits to maintaining 1998/1999 expenditures (baseline) on their student health services:
• Child and Family Services Authority
• Regional Health Authority
• School Jurisdictions
• Private Schools
• Private ECS Operators
• Charter Schools
• Alberta Mental Health Board
Funding accessed by Student Health Partnership based on Service Plan.
(Amount is based on student enrolment count and characteristics of the students in the Partnership.)
DISCUSSIONS WITH STUDENT HEALTH PARTNERSHIP
DECISIONS BY STUDENT HEALTH PARTNERSHIP
The Student Health Partnership can discuss different ways of addressing student health needs with baseline resources.
The Student Health Partnership decides how the pooled funding is spent.
STUDENT HEALTH PARTNERSHIP SERVICE PLAN
Reflects how student health and baseline funding are allocated to meet student health priorities.

Questions and Answers

What if a child/student changes schools during the year? Does the service/funding follow them to another Student Health Partnership?

This scenario needs to be considered by Student Health Partnerships in their Service Plan. It is a Partnership decision. Some contingency planning would be appropriate for these children and others; e.g., a student who suffers a traumatic injury or is diagnosed with a chronic debilitating illness during a school year.

How is funding allocated for alternative programs, such as home schooling, virtual school or the home education blended program?

Students registered with Alberta Learning in these programs are counted in the funding allocation model and funding is provided through the registering school jurisdiction or authority to the Student Health Partnership. Students registered in these programs do not necessarily live near the registering jurisdiction or authority.

Since it may be impractical for the Student Health Partnership to deliver student health services to a community outside its geographical area, the Partnership should consider alternatives, such as liaising with the Student Health Partnership in the student's home community or purchasing services for the student in the student's home community.

How do newly approved school authorities that have not been identified in the funding allocation join a Student Health Partnership?

Newly approved smaller school authorities need to contact a Student Health Partnership to join. It does not matter that they have not been identified in the funding allocation. All identified children with special health needs who are registered in school programs funded by Alberta Learning from Early Childhood Services (ECS) to Grade 12. are eligible.

How do school jurisdictions that need to participate in more than one Student Health Partnership allocate the funding to the various Partnerships?

The same funding allocation model that was originally used for the Student Health Initiative should be applied to determine how the allocation should be proportioned amongst the Partnerships (see the example below).

Example

Your school jurisdiction is joining two Student Health Partnerships and you want to use the original funding allocation model to determine how much of the total allocation to apply to each Partnership. To do this, you first need to identify which schools are in each Partnership, then take the following steps.

1. Determine for each school:
   - the number of ECS–Grade 4 students
   - the number of Grades 5–12 students
   - the number of students with mild/moderate disabilities
   - the number of students with severe disabilities.
2. Multiply each of these numbers by the weighting in the allocation model:
   - the number of ECS–Grade 4 students x 2 x 5%
   - the number of Grades 5–12 students x 5%
   - the number of students with mild/moderate disabilities x 2
   - the number of students with severe disabilities x 4.
3. Add the four numbers you obtained for each school in step two. This gives you the number of "weighted students" for each school. Add the number of weighted students for each school in the Partnership to determine the number of weighted students in each Partnership.
4. Add these two weighted student numbers for the two Partnerships to get the total number of weighted students for your jurisdiction.
5. Determine the percentage that each Partnership has of the total number of weighted students by dividing each Partnership's number of weighted students by the jurisdiction's weighted student total.
6. Multiply each Partnership's percentage by the total funds allocated to the school jurisdiction to determine each Partnership's allocation.

ABC School Jurisdiction is joining Partnership XYZ and Partnership QRS

A) The schools within Partnership XYZ have the following students:
   - 1540 in ECS–Grade 4
   - 3780 in Grades 5–12
   - 530 with mild/moderate disabilities
   - 120 with severe disabilities

B) The schools within Partnership QRS have the following students:
   - 2890 in ECS–Grade 4
   - 6760 in Grades 5–12
   - 910 with mild/moderate disabilities
   - 180 with severe disabilities

C) For Partnership XYZ:
   - 1540 x 2 x 5% = 154
   - 3780 x 5% = 189
   - 530 x 2 = 1060
   - 120 x 4 = 480

   weighted students = 1883

D) For Partnership QRS:
   - 2890 x 2 x 5% = 289
   - 6760 x 5% = 338
   - 910 x 2 = 1820
   - 180 x 4 = 720

   weighted students = 3167

- ABC School Jurisdiction has 1883 + 3167 = 5050 total weighted students.
- Partnership XYZ has 1883 of the total 5050 weighted students = 37%.
- Partnership QRS has 3167 of the total 5050 weighted students = 63%.

Therefore, Partnership XYZ receives 37% and Partnership QRS receives 63% of the total allocation for ABC School Jurisdiction.

Appendix C — Seven Required Components of the Service Plan

1. Statement of Accountability

- ☐ Signed by CEO or equivalent of each partner, with title and name of the person signing under each signature.
- ☐ Information is accurate and partner is in agreement with the information contained in the plan.
- ☐ Student Health Partnership is committed to carry out the terms and conditions of the Service Plan.
- ☐ All partners in the Partnership are maintaining their 1998/1999 levels of expenditure (baseline) on student health services.

2. Student Health Partnership Profile

- ☐ Operating name and mailing address of the Student Health Partnership.
- ☐ Names of designated contact(s), to a maximum of four, for public and media inquiries (address, phone #, fax, e-mail).
- ☐ List each of the partners — school jurisdictions, other school authorities, regional health authorities, child and family services authorities, regional offices of the Alberta Mental Health Board, and other partnering organizations.
- ☐ List any other relevant stakeholders.
- ☐ Identify the school jurisdiction designated as "the banker" to receive the funds on behalf of the Partnership.
- ☐ Vision and principles guiding the Partnership.

3. Student Health Needs and Service Priorities

- ☐ Ensure parents and relevant stakeholders have opportunities for input in identifying student needs.
- ☐ Identify student health and related support service needs which have not been met.
- ☐ Based on an assessment of student health needs and service gaps, service priorities must identify:
  - which needs, within the range of student health services, will be addressed in the Service Plan
  - reasons students with special health needs may be unable to access services; e.g., age restriction, level of severity of disability, duration of need for service, etc.

4. Goals

- ☐ The required short-term (process) goal is school-aged children with special health needs have access to a range of coordinated health and related support services to meet their needs.
- ☐ The long-term (outcome) goal is school-aged children with special health needs are able to participate fully in their education programs to attain their potential and be successful at learning.
- ☐ Identify additional goals to address outcomes such as:
  - continuous quality improvement
  - student, parent and other stakeholder satisfaction.

5. Performance Measures, Targets and Strategies

In the Service Plan year, the required *performance measures* and *targets* relate to the required short-term (process) goal and include:

- ☐ the number of students to be served
- ☐ range of services
- ☐ access to coordinated/integrated services to improve student learning.

To successfully manage student health planning and service delivery, strategies must address:

- ☐ the ongoing development of the Partnership, including decision-making and accountability processes
- ☐ an ongoing process for the assessment of student health needs and available resources
- ☐ processes to involve communities, parents/families and other stakeholders in planning for student health services
- ☐ a system for collecting and managing information
- ☐ processes for monitoring and evaluation
- ☐ an accessible dispute resolution process
- ☐ the operationalization of the service delivery model.

6. Human Resource Plan

- ☐ Identify the necessary human resources required to implement the Student Health Partnership Service Plan.
- ☐ In a chart, describe the position titles of the personnel hired to provide each eligible service under the professional and paraprofessional designations.
- ☐ In a chart, identify which partner is employing/contracting which personnel.
- ☐ Briefly describe how the human resource plan will lead to better coordinated/integrated services.

7. Financial Plan

- ☐ Determine if Form 1s need to be completed and submitted.
- ☐ Ensure that Form 1s on the provincial record correspond to Partnership's record.
- ☐ Complete and submit Form 2 (pages 1 & 2).
- ☐ Provide any additional financial information.
- ☐ Partnership identifies the proportioned amount of student health funding allocation each school jurisdiction and other school authority within the Partnership is contributing to this Partnership.

Appendix D — Classroom Teacher Survey about Student Health Services

You have been randomly selected to participate in a survey about student health services.

Complete this survey only if some of your students have special health needs that affect their ability to participate in, and/or take full advantage of their school program.

- By **"special health needs"** we mean physical disabilities, developmental disabilities, neurological disorders, sensory impairments, medical conditions and/or emotional/behavioural disabilities.

This survey asks questions about the student health services provided to students with special health needs.

- By **"student health services"** we mean health and related support services that help these students participate fully in their education programs to attain their potential and be successful at learning.
- We **do not** mean special education services nor services intended to benefit all students, such as prevention programs, bully proofing, diversion, conflict management, school health nursing or nutrition programs.
- Examples of student health services include speech-language therapy, occupational therapy, physical therapy, respiratory therapy, audiology, clinical nursing services and emotional/behavioural supports.

On a scale of 1 to 4, please rate the degree to which you agree with the following statements regarding the student health services provided to your students with special health needs during the **2000/2001 school year.**

		strongly agree	agree	disagree	strongly disagree	not applicable
i.	For each of my students with a special health need, an adequate plan is in place to provide student health services.	1	2	3	4	0
ii.	It is easy to refer students for student health services.	1	2	3	4	0
iii.	Student health services are provided within a reasonable time after a referral.	1	2	3	4	0
iv.	The student health services that my students need are available.	1	2	3	4	0
v.	The student health services have improved my students' abilities to be successful at learning.	1	2	3	4	0
vi.	For my students who need more than one student health service, the various services are well-coordinated.	1	2	3	4	0

Thank you for taking the time to participate.

Appendix E — Student Health Services Baseline Commitment

FORM 1

- **A partner that was in operation in 1998/1999 but has never joined a Partnership must submit a Form 1.**
- **A partner that is shifting some or all of its baseline commitment from one Partnership to another must submit a new Form 1.**

Name of Student Health Partnership: _____

Name of Partner: _____

STUDENT HEALTH SERVICES (Students who receive more than one student health service should be reported under each eligible service need.)	**Sept. 1998 to Aug. 1999 Estimated Number of Students Served (baseline)**	**Sept. 1998 to Aug. 1999 Estimated Student Health Service Delivery Costs (baseline)**
Speech-language Therapy		$
Physical Therapy		$
Occupational Therapy		$
Audiology		$
Respiratory Therapy		$
Clinical Nursing		$
Emotional/Behavioural Supports		$
Other — Please Specify		$
		$
Teacher Assistants Who Provide Student Health Services		$

TOTAL STUDENT HEALTH SERVICE DELIVERY COSTS (not including administration) $ _____ (A)

TOTAL ESTIMATED STUDENT HEALTH ADMINISTRATION COSTS $ _____ (B)

TOTAL ESTIMATED STUDENT HEALTH COSTS (A + B) _____ (C)

Signature: _____

Title: _____

Date: _____

Appendix F — Student Health Partnership Projected Budget

FORM 2 — PAGE 1

STUDENT HEALTH PARTNERSHIP: _____

PROJECTED BUDGET FOR THE 2001/2002 SERVICE PLAN YEAR

PARTNERSHIP'S TOTAL BASELINE COMMITMENT:	
Total Baseline (1998/99) Commitment for Partnership (From Form 1 of each partner in the Partnership)	$ _____
PROJECTED REVENUES:	
SHI Funding Allocation for Partnership	
Service Delivery	$ _____ (A)
Partnership Administration (4.5%)	$ _____ (B)
Other Revenue (as applicable)	$ _____ (C)
Projected Surplus from Previous Service Plan Year	$ _____ (D)
Total Projected Revenues *(A + B + C + D)*	$ _____
PROJECTED EXPENSES:	
Salaries and benefits for FTEs *(Taken from Form 2- Page two)*	$ _____ (E)
Other service delivery costs *(Taken from Form 2- Page two)*	$ _____ (F)
Partnership administration[1]	$ _____ (G)
Total Projected Expenses: *(E + F + G)*	$ _____

Signature on behalf of Partnership: _____

Title: _____

Date: _____

[1] Partnership administration expenses exceeding the 4.5% allocation must be borne by the Partnership.

FORM 2 — PAGE 2

PROJECTED HUMAN RESOURCE PLAN AND EXPENSES:			
Student Health Service Need	**# of FTEs to be Hired with SHI funds**	**Salaries and Benefits for Service Providers (FTEs)**	**Other Student Health Service Delivery Costs[2]**
Speech-Language Therapy			
Professional		$	$
Paraprofessional		$	$
Physical Therapy			
Professional		$	$
Paraprofessional		$	$
Occupational Therapy			
Professional		$	$
Paraprofessional		$	$
Audiology			
Professional		$	$
Paraprofessional		$	$
Respiratory Therapy			
Professional		$	$
Paraprofessional		$	$
Clinical Nursing			
Professional		$	$
Paraprofessional		$	$
Emotional/Behavioural Supports			
Professional		$	$
Paraprofessional		$	$
Teacher Assistants		$	$
Other			
Professional		$	$
Paraprofessional		$	$
Teacher Replacement	**Not applicable**	**Not applicable**	$ _____ **Special Eligible Cost to a maximum 1.5 % of Partnership's total service delivery funding allocation.**
Total	_____	$ _____ (E)	$ _____ (F)

[2]For example, clinical supervision, training (refer to Eligible Student Health Costs, page 5).

SCHOOL AUTHORITIES

Operating educational programs funded by Alberta Learning, as of January 2001

Charter School (C) —Private School (P) — Private ECS Operator (ECS)

REGION 1	TELEPHONE	CITY	
Christian School of the Netherlands Reformed Congregations of Lethbridge and Fort McLeod	(403) 381-3030	Monarch	(P)
Coaldale Canadian Reformed School Society	(403) 345-4055	Coaldale	(P)
Lethbridge Christian School Society	(403) 320-0677	Lethbridge	(P)
Providence Christian School Society	(403) 381-4418	Lethbridge	(P)
The Society for Christian Education in Southern Alberta	(403) 327-4223	Lethbridge	(P)
Henderson Lake Kindergarten Society	(403) 320-1353	Lethbridge	(ECS)
Lethbridge Montessori Society	(403) 327-5271	Lethbridge	(ECS)
Lethbridge Preschool Services Project	(403) 328-3020	Lethbridge	(ECS)
The Children's House Child Care Society	(403) 328-5553	Lethbridge	(ECS)
Victory Christian Fellowship of Lethbridge (1983) Inc.	(403) 320-2772	Lethbridge	(ECS)
REGION 2			
CAPE – Centre for Academic and Personal Excellence Institute	(403) 528-2983	Medicine Hat	(C)
40-Mile Christian Education Society	(403) 545-2107	Bow Island	(P)
Cornerstone Christian School	(403) 529-6169	Medicine Hat	(P)
Medicine Hat Christian School	(403) 526-3246	Medicine Hat	(P)
Montessori Elementary Institute of Southeastern Alberta	(403) 528-9668	Medicine Hat	(P)
Newell Christian School Society	(403) 378-4448	Brooks	(P)
Veinerville Christian Academy (one of Alberta Conference of Seventh Day Adventist Church schools)	(403) 527-2714	Medicine Hat	(P)
Acadia Valley ECS	(403) 565-2244	Acadia Valley	(ECS)
Duchess Early Childhood Development Organization	(403) 378-4241	Duchess	(ECS)
Empress Early Childhood Services Society	(403) 379-2294	Bindloss	(ECS)
New Brigden Early Childhood Services Association	(403) 664-2490	New Brigden	(ECS)
Oyen Early Childhood Services	(403) 664-3744	Oyen	(ECS)
Southview Kiddie Kampus Day Care Association	(403) 529-9221	Medicine Hat	(ECS)
The Schuler Early Childhood Service	(403) 839-3732	Schuler	(ECS)
REGION 3			
Banff Mountain Ski Academy Society	(403) 762-8585	Banff	(P)
Brant Christian School Society	(403) 684-3752	Brant	(P)
Canmore Society for Community Education (The)	(403) 609-2105	Canmore	(P)
Evangelical Free Church of Champion, Alberta (Hope Christian School)	(403) 897-3019	Champion	(P)
Edison School Society	(403) 938-7670	Okotoks	(P)
Strathcona-Tweedsmuir School	(403) 938-4431	Okotoks	(P)
Arrowwood and District ECS Society	(403) 534-3825	Arrowwood	(ECS)
Captain Crunch College	(403) 643-3565	Carmangay	(ECS)
Champion Kindergarten Association	(403) 897-2494	Champion	(ECS)
Lomond Little Learners Society	(403) 792-3686	Lomond	(ECS)

REGION 4

Action for Bright Children (Calgary Society)	(403) 244-8801	Calgary	(C)
Almadina School Society	(403) 543-5070	Calgary	(C)
Foundations for the Future Charter Academy School Society	(403) 243-3316	Calgary	(C)
Science Alberta Charter School Society	(403) 260-1996	Calgary	(C)
383385 Alberta Ltd.	(403) 229-0386	Calgary	(P)
Airdrie Koinonia Christian School Society	(403) 948-5100	Airdrie	(P)
Alberta Charitable Society of St. Pius X	(403) 233-0031	Calgary	(P)
Association for Christian Schooling in Calgary South	(403) 254-6682	Calgary	(P)
Banbury Crossroads School	(403) 270-7787	Calgary	(P)
Bearspaw Christian School Society	(403) 295-2566	Calgary	(P)
Bethel Christian Academy Society	(403) 250-1342	Calgary	(P)
Calgary French School Society	(403) 240-1500	Calgary	(P)
Calgary Quest Children's Society	(403) 253-0003	Calgary	(P)
Calgary Society for Christian Education (Calgary Christian School)	(403) 242-2896	Calgary	(P)
Calgary Society for Effective Education of Learning Disabled (Calgary Academy)	(403) 686-6444	Calgary	(P)
Calgary Waldorf School Society	(403) 287-1868	Calgary	(P)
Canadian Reformed School Society of Calgary	(403) 590-5881	Calgary	(P)
Chinook Winds Adventist Academy (one of Alberta Conference of Seventh Day Adventist Church schools)	(403) 286-5686	Calgary	(P)
Clear Water Academy Foundation	(403) 217-8448	Calgary	(P)
Congregation House of Jacob Mikveh Israel (Akiva Academy)	(403) 258-1312	Calgary	(P)
Delta West Academy	(403) 290-0767	Calgary	(P)
Eastside City Church	(403) 569-1003	Calgary	(P)
Equilibrium International Education Institute	(403) 283-1111	Calgary	(P)
Foothills Academy Society	(403) 270-9400	Calgary	(P)
GCA Educational Society	(403) 254-9050	Calgary	(P)
Heritage Christian Academy Foundation	(403) 219-3201	Calgary	(P)
Integro Youth Counselling Services Ltd.	(403) 287-9597	Calgary	(P)
Janus Academy Society	(403) 241-6968	Calgary	(P)
Joshua Christian School Society	(403) 250-2519	Calgary	(P)
Level Land Junior Academy (one of Alberta Conference of Seventh Day Adventist Church schools)	(403) 947-2022	Beiseker	(P)
Lycee Louis Pasteur Society	(403) 243-5420	Calgary	(P)
Master's Academy Educational Society	(403) 242-7034	Calgary	(P)
Mennonite Education Society of Calgary	(403) 531-0745	Calgary	(P)
Montessori School of Calgary	(403) 229-1011	Calgary	(P)
Mountain View Academy Society	(403) 217-4346	Calgary	(P)
Muslim Community Foundation of Calgary (Calgary Islamic Private School)	(403) 248-2773	Calgary	(P)
North Calgary Christian Academy Foundation	(403) 282-3405	Calgary	(P)
Prince of Peace Lutheran Church of Calgary	(403) 285-2288	Calgary	(P)
Renfrew Educational Services	(403) 291-5038	Calgary	(P)
Rundle College Society	(403) 291-3866	Calgary	(P)
The Calgary Jewish Academy	(403) 253-3992	Calgary	(P)
The Canadian Montessori Association (1983) (Calgary Montessori School)	(403) 252-3281	Calgary	(P)
The Edge School for Athletes Society	(403) 686-6444	Calgary	(P)
The Timothy Centre for Scholarship Ltd.	(403) 230-0702	Calgary	(P)

The Western Canadian District of the Christian and Missionary Alliance	(403) 265-7900	Calgary	(P)
Third Academy International Ltd.	(403) 288-5335	Calgary	(P)
Truth Church of Calgary (Apostolic Christian Training School)	(403) 289-7570	Calgary	(P)
Webber Academy	(403) 277-4700	Calgary	(P)
West Island College Society of Alberta	(403) 255-5300	Calgary	(P)
Bearspaw Pre-School Society	(403) 239-4040	Calgary	(ECS)
Bragg Creek Education Services Association	(403) 949-3939	Bragg Creek	(ECS)
Calgary Aboriginal Headstart	(403) 215-0399	Calgary	(ECS)
Child's Way ECS Association	(403) 233-8024	Calgary	(ECS)
Churchill Park Family Care Society	(403) 297-4998	Calgary	(ECS)
Coral Springs Child Care Society	(403) 285-2467	Calgary	(ECS)
Dalhousie Community Association	(403) 288-1050	Calgary	(ECS)
ECS Learning Association of Calgary	(403) 652-1503	Calgary	(ECS)
Edelweiss Preparatory School Society	(403) 210-3456	Calgary	(ECS)
Foothills Creative Beginnings Preschool and ECS Association	(403) 239-8072	Calgary	(ECS)
Froebel Kindergarten Society of Alberta	(403) 285-1395	Calgary	(ECS)
Glamorgan Community ECS Institute	(403) 242-8694	Calgary	(ECS)
GRIT Calgary Society	(403) 215-2444	Calgary	(ECS)
Highwood Community ECS Association	(403) 289-9329	Calgary	(ECS)
Hounsfield Heights-Briar Hill Community Association	(403) 289-7066	Calgary	(ECS)
Huntington Hills Community Association	(403) 275-6666	Calgary	(ECS)
Irricana ECS Society	(403) 935-4727	Irricana	(ECS)
Kathryn Early Childhood Services Society	(403) 935-4588	Kathyrn	(ECS)
Marlborough Day Nursery ECS Limited	(403) 272-3703	Calgary	(ECS)
Montessori Education Pre-School and ECS Institute of Alberta	(403) 255-8664	Calgary	(ECS)
Mount Royal College Day-Care Society	(403) 240-6410	Calgary	(ECS)
New Heights Early Learning Services Society	(403) 240-1312	Calgary	(ECS)
PACE Rehabilitation Society for Children with Motor Disabilities	(403) 234-7876	Calgary	(ECS)
Playcare ECS Ltd.	(403) 255-9339	Calgary	(ECS)
Providence Child Development Society	(403) 255-5577	Calgary	(ECS)
Salvation Army Child Village	(403) 246-1124	Calgary	(ECS)
The Heartland Agency	(403) 541-0277	Calgary	(ECS)
The Prep Program – A Calgary Society to Promote Education for Pre-Schoolers	(403) 282-5011	Calgary	(ECS)
The Society for Treatment of Autism (Calgary Region)	(403) 253-2291	Calgary	(ECS)
Thornhill Child Care Centre Society	(403) 274-2335	Calgary	(ECS)
University Child Care Centre Society	(403) 220-3303	Calgary	(ECS)
Westbrook (ECS) Association	(403) 932-6501	Cochrane	(ECS)
Westview Baptist Church of Calgary, Alberta	(403) 239-1114	Calgary	(ECS)
Woodbine DayCare ECS Association	(403) 281-4997	Calgary	(ECS)
REGION 5			
Koinonia Christian Education Society (Spruce Ridge Christian School, one of two operated by the authority)	(403) 637-2449	Didsbury	(P)
Prairie Bible Institute	(403) 443-8030	Three Hills	(P)
Cereal Early Childhood Service Association	(403) 326-3757	Cereal	(ECS)
Midway ECS Society	(403) 337-2888	Carstairs	(ECS)
Youngstown Kindergarten Association	(403) 779-3820	Youngstown	(ECS)

REGION 6

Alberta Conference of Seventh Day Adventist Church (school authority for several schools throughout Alberta)	(403) 342-5044	Red Deer	(P)
Canadian University College	(403) 342-5044	College Heights	(P)
Central Alberta Christian High School Society	(403) 782-4535	Lacombe	(P)
Horizon School Committee	(403) 556-6310	Olds	(P)
Koinonia Christian School – Red Deer Society	(403) 346-1818	Red Deer	(P)
Lighthouse Christian School Society	(403) 887-2166	Sylvan Lake	(P)
Living Faith Evangelistic Association	(403) 722-2225	Caroline	(P)
Olds Koinonia Christian School Society	(403) 556-4038	Olds	(P)
Olds Mountain View Christian School Association	(403) 556-1551	Sundre	(P)
Parkland Community Living and Supports Society	(403) 347-3333	Red Deer	(P)
Ponoka Christian School Society	(403) 783-6563	Ponoka	(P)
The Lacombe Christian School Society	(403) 782-6531	Lacombe	(P)
The Rimbey Christian School Society	(403) 843-3904	Rimbey	(P)
The Rocky Christian School Society	(403) 845-3516	Rocky Mtn House	(P)
Word of Life School Society	(403) 343-6510	Red Deer	(P)
Bashaw Early Learning Centre	(780) 372-9092	Bashaw	(ECS)
Caroline Early Childhood Centre Committee	(403) 722-3918	Caroline	(ECS)
Children's Services Centre, An Alberta Society	(403) 340-2606	Red Deer	(ECS)
Early Childhood Services of Innisfail	(403) 227-4295	Innisfail	(ECS)
Expression's ECS Society East	(403) 346-8706	Red Deer	(ECS)
Lotsa Tots Early Childhood Society	(403) 343-8472	Red Deer	(ECS)
Red Deer College	(403) 357-3600	Red Deer	(ECS)
Reed Ranch Limited	(403) 556-2429	Olds	(ECS)
Sylvan Lake Kinder-Care Association	(403) 887-5330	Sylvan Lake	(ECS)

REGION 7

Cornerstone Christian Academy of Camrose	(780) 672-7197	Kingman	(P)
Sedgewick Seventh Day Adventist School (one of Alberta Conference of Seventh Day Adventist Church schools)	(780) 384-3671	Sedgewick	(P)
Alliance and District ECS Society	(780) 879-3826	Alliance	(ECS)
Bawlf ECS Society	(780) 373-3775	Bawlf	(ECS)
Camrose Children's Center	(780) 672-0131	Camrose	(ECS)
Castor Early Childhood Society	(403) 882-3300	Castor	(ECS)
Clandonald ECS Association	(780) 853-2122	Clandonald	(ECS)
Dewberry Early Childhood Parents Society	(780) 847-3051	Dewberry	(ECS)
Edberg/Meeting Creek ECS Society	(780) 877-3766	Edberg	(ECS)
Hardisty Early Childhood Services Society	(780) 888-3899	Hardisty	(ECS)
Hay Lakes ECS	(780) 878-3368	Hay Lakes	(ECS)
Heisler ECS Association	(780) 889-2209	Heisler	(ECS)
Innisfree and District Early Childhood Services Association	(780) 592-3963	Innisfree	(ECS)
Kingman-Round Hill Child Development Centre	(780) 662-2508	Ohaton	(ECS)
Kitscoty and District Early Childhood Education Kindergarten	(780) 846-2212	Kitscoty	(ECS)
Local Advisory Committee For Bluebird Kindergarten	(780) 745-2479	Paradise Valley	(ECS)
Lougheed Childhood Services Society	(780) 386-3799	Lougheed	(ECS)
Nordic Community ECS Society	(780) 855-3921	New Norway	(ECS)
Rosalind Early Childhood Society	(780) 375-3916	Rosalind	(ECS)
Sedgewick Early Childhood Centre	(780) 384-2266	Sedgewick	(ECS)
Sifton ECS Society	(780) 672-1071	Camrose	(ECS)
Strome Early Childhood Services Society	(780) 376-3569	Strome	(ECS)

Sunshiners Pre-School Association	(780) 856-2049	Hughenden	(ECS)
Tulliby Lake Educational Foundation	(780) 847-2666	Tulliby Lake	(ECS)
REGION 8			
Koinonia Christian Education Society (Yellowhead Christian School, one of two operated by the authority)	(403) 637-2449	Edson	(P)
Living Waters Christ Academy	(780) 962-3331	Spruce Grove	(P)
St. Matthew Evangelical Lutheran Church of Stony Plain	(780) 963-2715	Stony Plain	(P)
Creative Children's Kindergarten Society	(780) 962-8756	Spruce Grove	(ECS)
REGION 9			
Peace Hills Adventist Academy (one of Alberta Conference of Seventh Day Adventist Church schools)	(780) 352-8555	Wetaskiwin	(P)
Pigeon Lake Regional Early Childhood Services Advisory	(780) 352-0266	Falun	(ECS)
Wetaskiwin Headstart Society	(780) 361-0085	Wetaskiwin	(ECS)
Winfield Child Development Association	(780) 682-2288	Winfield	(ECS)
REGION 10			
Aurora Charter School Ltd.	(780) 930-5502	Edmonton	(C)
Education for the Gifted Society of Strathcona County	(780) 467-6409	Sherwood Park	(C)
Suzuki Charter School Society	(780) 468-2598	Edmonton	(C)
The Boyle Street Service Society	(780) 424-4106	Edmonton	(C)
Alberta College	(780) 423-6220	Edmonton	(P)
Bosco Homes A Society For Children and Adolescents	(780) 440-0708	Edmonton	(P)
Canadian Reformed School Society of Edmonton (Parkland Immanuel Christian School)	(780) 444-6443	Edmonton	(P)
Concordia University College of Alberta	(780) 479-8481	Edmonton	(P)
Coralwood Adventist Academy (one of Alberta Conference of Seventh Day Adventist Church schools)	(780) 454-2173	Edmonton	(P)
Devon Christian School Society *(School site located in Region 10)	(780) 987-4157	Devon*	(P)
Edmonton Academy Society for Learning Disabled	(780) 482-5449	Edmonton	(P)
Edmonton Islamic School Society	(780) 454-4573	Edmonton	(P)
Elves Special Needs Society	(780) 454-5310	Edmonton	(P)
Independent Baptist Christian Education Society	(780) 451-1864	Edmonton	(P)
Leduc Society for Christian Education	(780) 986-8353	Leduc	(P)
Meadowlark Christian School	(780) 483-6476	Edmonton	(P)
Progressive Academy Education Society	(780) 455-8344	Edmonton	(P)
Tempo School	(780) 434-1190	Edmonton	(P)
The Company of the Cross (Alberta) *(School site located in Region 10)	(780) 789-4826	Stony Plain*	(P)
The Edmonton Lutheran School Society	(780) 474-0063	Edmonton	(P)
Universal Educational Institute	(780) 451-1848	Edmonton	(P)
Victory Christian School Society	(780) 413-0322	Edmonton	(P)
ABC Head Start Society	(780) 461-5353	Edmonton	(ECS)
Ben Calf Robe Society	(780) 477-6490	Edmonton	(ECS)
Beverly Day Care Society and Family Resource Centre	(780) 477-1151	Edmonton	(ECS)
Community Options – A Society for Children and Families	(780) 455-1818	Edmonton	(ECS)
Connect Society DEAF Services	(780) 454-9581	Edmonton	(ECS)
Department of Elementary Education University of Alberta	(780) 492-2811	Edmonton	(ECS)
Family Linkages Foundation of Alberta	(780) 488-6600	Edmonton	(ECS)
First Mennonite Church	(780) 436-1823	Edmonton	(ECS)

HOMES Home Opportunities for Multi-Handicapped Education Society (The GRIT Program)	(780) 454-9910	Edmonton	(ECS)
Jasper Place Child and Family Resource Society	(780) 489-2243	Edmonton	(ECS)
Londonderry Child Development Society	(780) 473-7021	Edmonton	(ECS)
Norwood Child and Family Resource Centre	(780) 471-3737	Edmonton	(ECS)
Oliver School Center for Children	(780) 482-2116	Edmonton	(ECS)
Primrose Place Family Centre Association	(780) 469-0663	Edmonton	(ECS)
Sherwood Park Kindergarten	(780) 467-5644	Sherwood Park	(ECS)
St. Albert Day Care Society	(780) 459-5380	St. Albert	(ECS)
St. Peter's Lutheran Kindergarten (Leduc)	(780) 986-5151	Leduc	(ECS)
Students' Union of the University of Alberta and Community Day Care Centre Society	(780) 492-2245	Edmonton	(ECS)
The Franciscan Sisters Benevolent Society	(780) 424-6872	Edmonton	(ECS)
West End Day Care Society	(780) 451-5691	Edmonton	(ECS)
Young Men's Christian Association	(780) 423-9600	Edmonton	(ECS)
REGION 11			
Canadian Reformed School Society of Neerlandia	(780) 674-4774	Neerlandia	(P)
Morinville Christian Fellowship	(780) 939-2987	Morinville	(P)
St. James Lutheran Church of Whitecourt	(780) 778-2055	Whitecourt	(ECS)
REGION 12			
Lakeland Christian School Society	(780) 639-2077	Cold Lake	(P)
The Life Values Society for Effective Education	(780) 645-4490	St. Paul	(P)
Trinity Christian School Association	(780) 594-2205	Cold Lake	(P)
Mannawanis Native Friendship Centre	(780) 645-4630	St. Paul	(ECS)
The Community Association for Lasting Success	(780) 632-3225	Vegreville	(ECS)
REGION 13			
Grande Prairie and District Society for Christian Education	(780) 539-4566	Grande Prairie	(P)
Hillcrest Christian School Society	(780) 539-9161	Grande Prairie	(P)
Berwyn Kindergarten Society	(780) 338-3750	Berwyn	(ECS)
REGION 14			
Peace River Adventist Junior Academy (one of Alberta Conference of Seventh Day Adventist Church schools)	(780) 624-4480	Peace River	(P)
Nampa and District Kindergarten Society	(780) 322-3940	Nampa	(ECS)
Peace River Kindergarten Society	(780) 624-1445	Peace River	(ECS)
REGION 15			
Lesser Slave Lake North Country Community Association	(780) 776-2215	Joussard	(P)
Slave Lake Koinonia Christian School Society	(780) 849-5400	Slave Lake	(P)
REGION 16			
Moberly Hall School Society	(780) 743-8409	Fort McMurray	(C)
Fort McMurray Christian School Society	(780) 743-1079	Fort McMurray	(P)
Renaissance Learning Society	(780) 791-4169	Fort McMurray	(P)
REGION 17			
High Level Christian Education Society	(780) 926-2360	High Level	(P)